U.S. Department of Labor Office of Labor Management _‡ ≈≈ Standards Washington DC 20210

FORM LM-30 LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

Form approved Office of Management and Budget No 1215-0188 Expires 11 30-2006

This report is mandatory under P L 88-257 as amended Failure to comply may result in criminal prosecution fines or civil penalties as provided by 29 U S C 439 or 440

Inis report is mandatory under P.L. 86-257 as amended. Failure to comply may resu	it in criminal prosections lines of civil penalities as provided by 29 0 3 C 459 of 440	
For Official Use Only		
READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT		
E ONS DOOR		
1 File Number U	2 Fiscal Year Covered From	
12411	1 / 1 / 2004 Through 12 / 31 / 2004	
3 Name and address of person filing	4 Name file number and address of labor organization	
Name KENNETH W WOOD	Name TEAMSTERS LOCAL UNION NO 79	
	Labor Organization File Number 035-477	
P O Box Bldg Room No if any	P O Box Building and Room Number if any	
Street 5818 E MARTIN LUTHER KING JR BLVD	Street 5818 E MARTIN LUTHER KING JR BLVD	
City TAMPA	City TAMPA	
State Florida ZIP Code + 4 33619-1033	State Florida ZiP Code + 4 33619-1033	
5 Position in labor organization PRESIDENT & BUSINESS MANAGER		
α ε		
Enter appropriate data below if during the past fiscal year you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions)		
A Held an interest in engaged in transactions (including loans) with or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent		
6 Name and address of Employer (including trade name if any)	7 a Nature of Interest Transaction or Income	
Name		
Trade Name If any		
PO Box Bldg Room No if any		
	7 b Amount	
Street		
City		
State ZIP Code + 4	t)	
Signature ز کر با بازیان		
15 Signature and verification The undersigned declares under penalty of Perjury and other applicable penalties of the law that all of the information submitted in this report (including the information contained in any accompanying documents) has been examined by the signatory and is to the best of the undersigned s knowledge and belief true correct and complete (See the section on penalties in the instructions)		
Signed Kuth Wood , 1	On Date 813-621-1391 Telephone Number	
1		

Name of Person Filing KENEWETH WOOD	File Number U		
B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent or (2) any part of which consists of buying from or selling or leasing directly or indirectly to or otherwise dealing with your labor organization or with a trust in which your labor organization is interested			
8 Name and address of Business (including trade name if any) Name TEAMSTERS UPS 401K TAX DEFERRED SAVINGS PLAN Trade Name if any P O Box Bidg Room No if any Street 225 FRANKLIN STREET City BOSTON State Massachusetts ZIP Code + 4 02169 10 If 9 b or 9 c is checked give trust or employer's name Name CITI STREET Trade Name if any	9 Business deals with a Labor Organization b Trust c Employer 11 a Nature of such dealing		
PO Box Bldg Room No if any Street ONE HERITAGE DRIVE			
	11 b Approximate dollar value of such dealing		
City NORTH QUINCY State Massachusetts ZIP Code + 4 02171	12 a Nature of interest held or income received TRUSTEE DINNER MEITING		
	12 b Amount	\$160	
C Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value			
13 a Name and address of Employer or Labor Relations Consultant (Including trade name if any)	14 a Nature of payment		
Name Name			
Trade Name if any			
P O Box Bldg Room No if any Street City State ZIP Code + 4			
13 b is the Business an Employer or Consultant?	14 b Amount of payment.		